



Commonwealth  
of Massachusetts

Form CPF D105: Summary Report of Campaign  
Receipts and Expenditures  
Office of Campaign and Political Finance

File with: Director  
Office of Campaign and Political Finance  
One Ashburton Place  
Boston, MA 02108  
(617) 727-8352

CPF ID# 13783  
For Office Use

Reporting Period from: 12/16/2002 through 12/31/2002  
Date Month Year Date Month Year

Name of Candidate/Committee COMMITTEE TO ELECT DENISE SIMMONS

Office Sought: \_\_\_\_\_

Name of Bank Sovereign Bank New England 63004992168

Beginning Balance for Reporting Period \$ 266.53 (1)

Total Receipts in the Reporting Period \$ 0.00 (2)

Total Expenditures in the Reporting Period \$ 9.00 (3)

Ending Balance for the Reporting Period \$ 257.53 (4)

I hereby declare that the information contained herein is true and correct to the best of my knowledge and belief:

Eleanor Coolidge  
Signature of Cashier or Bank Treasurer

Donna M. Campbell/Eleanor Coolidge

Name of Cashier or Bank Treasurer

(617) 533-1104/1137

Telephone Number

2/24

OFFICE OF CAMPAIGN & POLITICAL FINANCE

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**Form CPF D106: Receipts and Expenditures Report****Report of Expenditures***For Bank Use Only*

Office of Campaign and Political Finance, One Ashburton Place, Boston, MA 02108 (617) 727-8352

**Candidate Name:** DENISE SIMMONS**Committee Name:** \_\_\_\_\_**Name of Bank:** Sovereign Bank New England 63004992168**Reporting Period:** 12/16/2002 through 12/31/2002 **Page#** \_\_\_\_\_**Instructions to Bank**

1. The following forms have been provided for banks to fulfill the depository reporting requirements:

CPF D105 Summary Sheets, to be completed and signed by the bank

CPF D106 Contributions and Expenditures report, bank completes expenditures side only

2. To prepare the expenditure lists, the bank should first collect all checks presented for payment in the reporting period. They should then be sorted in alphabetical order. Checks should then be listed alphabetically, showing the date the check was paid, the payee's name and address, the purpose code number, the specific purpose and the amount. This information should be taken from the front of the check, exactly as it was written by the committee. If any information is omitted from the check, the bank should place an asterisk (\*) in the appropriate column on this form.

3. Please also list any other expenditures made from this account, including wire transfers, bank charges and fees

**Purposes of Payment**

1. TV, Radio

4. Printing

7. Signs or Displays

2. Newspaper

5. Office

8. Transfer of Funds

3. Meetings

6. Travel

9. Other.....

Date	ChkPd	Payee	Address	Code	Specific Purpose	Amount
12/31/02		SOVEREIGN BANK	2 MORRISSEY BLVD	*	TOTAL SERVICE FEES	\$9.00
Total Expenditures this page						\$9.00

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